

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	Rm	FSI	01-03-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
1	✓ 1/14/01
2	✓ 1/14/01
3	✓ ✓ 1/14/01
4	✓ ✓ 1/14/01
5	✓ ✓ 1/14/01
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If more than 150 claims or 10 actions  
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Best Available Copy